

State Bank Of Travancore
INTERNET BANKING "ONLINE SBT"

Registration Form for Reset Profile password

(For individuals)

FOR OFFICE USE
Application Serial number

To
The Branch Manager
State Bank Of Travancore

THRIKKAKARA COCHIN UNIVERSITY CAMPUS Branch

I am a registered USER of your Internet Banking Service - "OnlineSBT" for my our following Account (s).

My Reset profile password reference number is **P473196**

Applicant's Name : (Max. 25 characters) **Mr. RAHUL KUMAR**

User Name(As recorded in Internet Banking) **rahul0394**

I have forgotten the profile password and I request you to reset the same.

Date of Birth:**18/08/1996**

Email Address: **er.rahulyadav@mail.com**

Address (as per bank's records)	Telephone No(s).
<u>NIRANJANPUR CHAINPUR P O,,KAIMUR BIHAR,Kaimur (Bhabua)</u>	Office: .
Pin: 821106	Residence: .

I confirm having read and understood the document containing the "Terms of Service (Terms & Conditions) " governing the SBT's Internet Banking and I accept the same. I further agree that the transactions executed over OnlineSBT in above-mentioned accounts under my Username and Password will be legally binding on me.

APPLICANT'S SIGNATURE

SIGNATURE VERIFIED

AUTHORISED OFFICIAL

Date:_____

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PARTICULARS	DATE	SIGNATURE OF AUTHORISED OFFICIAL
The account numbers and the account name quoted and the signature in the registration form tallied with Bank records.		
Authorisation for duplicate noted against original entry.		

Notes:

Recommended for providing rejecting Reset profile password	Permitted rejected
OFFICER Date:_____	BRANCH MANAGER / MANAGER OF DIVISION Date:_____

Reason(s) for rejection (if any)		
	Date	SIGNATURE OF OFFICIAL
Reason(s) advised to the Applicant		
Clearance for release of duplicate Uploaded		